

Where children are born can affect their chances for a strong start in life. Babies need good health, strong families, and positive early learning experiences to foster their healthy brain development and help them realize their full potential.

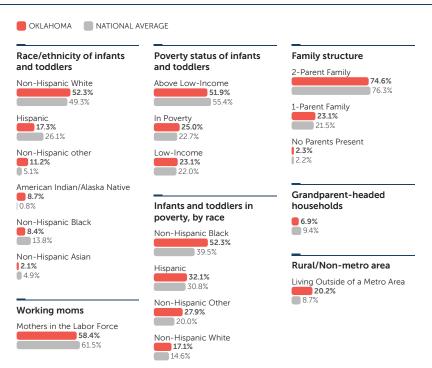
This fact sheet provides a snapshot of how infants, toddlers, and their families are faring with respect to these three developmental domains. For each domain, selected child or family indicators and policy indicators are highlighted and compared to national averages. Important demographic information is also included. A summary table of all indicators is provided on the last page, for reference.





### Overview

Oklahoma is home to 157,083 infants and toddlers, representing 4 percent of the state's population. As many as 48 percent live in households with incomes less than twice the federal poverty line (in 2017, about \$50,000 a year for a family of four), placing them at economic disadvantage. America's youngest children are diverse and are raised in a variety of family contexts. A broad array of policies and services are required to ensure that all of them have an equitable start in life.





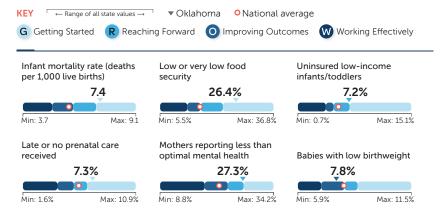


#### What is Good Health?

Good physical and mental health provide the foundation for babies to develop physically, cognitively, emotionally, and socially. The rate of brain growth is faster in the first 3 years than at any other stage of life, and this growth sets the stage for subsequent development. Access to good nutrition and affordable maternal, pediatric, and family health care are essential to ensure that babies receive the nourishment and care they need for a strong start in life.

Oklahoma falls in the Getting Started (G) tier of states when it comes to the overall health of infants and toddlers. The state's low ranking in the Good Health domain primarily reflects indicators in the Getting Started (G) tier across the subdomains of nutrition and food security, health care access and affordability, and maternal health. However, the percentage of babies with low birthweight is in the Improving Outcomes (O) tier. Oklahoma's Medicaid plan covers early childhood mental health services in home settings, pediatric/family medicine practices, and early care and education programs.

### Six Key Indicators of Good Health



## Good Health Policy in Oklahoma

Medicaid expansion state	No 😵
State Medicaid policy for maternal depression screening in well-child visits	No policy
Medicaid plan covers social-emotional screening for young children	Yes 🗸
Medicaid plan covers IECMH services at home	Yes 🗸
Medicaid plan covers IECMH services at pediatric/family medicine practices	Yes 🗸
Medicaid plan covers IECMH services at ECE programs	Yes 🗸



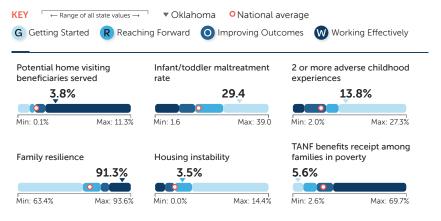


### **What Defines Strong Families?**

Young children develop in the context of their families, where stability and supportive relationships nurture their growth. All families of infants and toddlers benefit from support with parenting, and many—particularly those challenged by economic instability—need access to resources that help them meet their children's daily and developmental needs. Important supports include home visiting services, child welfare systems that are responsive to young children's needs, and family-friendly employer policies that provide paid sick and family leave.

Oklahoma falls in the Getting Started (G) tier of states when it comes to indicators of Strong Families. The state's low ranking in this domain is primarily due to the predominance of indicators in the Getting Started (G) tier; these indicators include the infant/toddler maltreatment rate, the prevalence of adverse childhood experiences, and neighborhood safety. Oklahoma does not require employers to offer paid sick days that cover care for children, nor does the state have a paid family leave program.

## Six Key Indicators of Strong Families



### Strong Families Policy in Oklahoma

Paid sick time that covers care for child	No 😵
Paid family leave	No 🞖

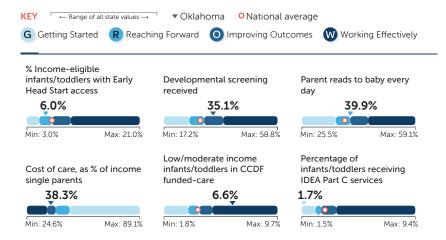


# What Defines Positive Early Learning Experiences?

Infants and toddlers learn through play, active exploration of their environment, and, most importantly, through interactions with the significant adults in their lives. The quality of babies' early learning experiences at home and in other care settings has a lasting impact on their preparedness for life-long learning and success. Parents who require child care while they work or attend school need access to affordable, high-quality care options that promote positive development.

Oklahoma scores in the Improving Outcomes (O) tier of states when considering key indicators related to early care and education and early intervention for infants and toddlers. The state's high ranking in the Positive Early Learning Experiences domain is primarily due to the less burdensome cost of infant care (as a percentage of single parents' and married parents' incomes) in Oklahoma, compared to other states. However, the percentage of parents who read to and sing songs to their babies daily falls in the Getting Started (G) and Reaching Forward (R) tiers, respectively.

# Six Key Indicators of Positive Early Learning Experiences



# Positive Early Learning Experiences Policy in Oklahoma

Families above 200% of FPL eligible for child care subsidy



# All indicators for Oklahoma

G Getting Started R Reaching Forward O Improving Outcomes W Working Effectively

## **Good Health**

G Eligibility limit (% FPL) for pregnant women in Medicaid	<b>138.0</b> National average: 200.0	R Uninsured low-income infants/toddlers	<b>7.2%</b> National average: 5.8%
G Low or very low food security	<b>26.4%</b> National average: 16.5%	G Infants ever breastfed	<b>75.9%</b> National average: 83.2%
G Infants breastfed at 6 months	49.0% National average: 57.6%	G Late or no prenatal care received	<b>7.3%</b> National average: 6.2%
R Mothers reporting less than optimal mental health	<b>27.3%</b> National average: 22.0%	R Preventive medical care received	90.8%
R Preventive dental care received	<b>27.7%</b> National average: 30.0%	Babies with low birthweight	<b>7.8%</b> National average: 8.2%
G Infant mortality rate (deaths per 1,000 live births)	<b>7.4</b> National average: 5.9	G Received recommended vaccines	<b>67.0%</b> National average: 70.7%

# **Strong Families**

R Housing instability	<b>3.5%</b> National average: 2.5%	R Crowded housing	<b>11.5%</b> National average: 15.6%
G TANF benefits receipt among families in poverty	<b>5.6%</b> National average: 20.6%	G Infant/toddler maltreatment rate	<b>29.4</b> National average: 16.0
<b>G</b> Unsafe neighborhoods	9.0% National average: 6.3%	W Family resilience	91.3% National average: 82.6%
<b>G</b> 1 adverse childhood experience	<b>31.9%</b> National average: 21.9%	<b>G</b> 2 or more adverse childhood experiences	13.8% National average: 8.3%
G Infants/toddlers exiting foster care to permanency	96.0% National average: 98.4%	Potential home visiting beneficiaries served	<b>3.8%</b> National average: 1.9%

# Positive Early Learning Experiences

R Parent reads to baby every day	<b>39.9%</b> National average: 38.2%	<b>G</b> Parent sings to baby every day	<b>54.4%</b> National average: 56.4%
R % Income-eligible infants/toddlers with Early Head Start access	<b>6.0%</b> National average: 7.0%	O Cost of care, as % of income married families	<b>11.5%</b> National average: N/A
O Cost of care, as % of income single parents	<b>38.3%</b> National average: N/A	W Low/moderate income infants/toddlers in CCDF funded-care	<b>6.6%</b> National average: 4.2%
O Developmental screening received	<b>35.1%</b> National average: 30.4%	R Infants/toddlers with developmental delay	1.2% National average: 1.1%
G Percentage of infants/toddlers receiving IDEA Part C services	1.7% National average: 3.1%		





